

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

12175	78			
OMB APP	ROVAL			
OMB Number: 3235-0076				
Expires:	April 30, 2008			
Estimated average burden hours per response16.00				
SEC USE ONLY				
Prefix	Serial			
DATE RECEIVED				

Name of Offering (Lineax if this is an amendment and name has changed, and indicate change.)	
Convertible Note Financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer.	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Avvenu, Inc.	07079984
	elephone Number (Including Area Code) 50) 330-1303
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	elephone Number (Including Area Code)
Brief Description of Business	PROCESSED
Development of internet network software.	OCT 2 9 2007 —
Type of Business Organization	D
	ase specify): THOWSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization:    Month Year	

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A, BASIC IDENTIFICA	THON DATA								
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>									
• Each beneficial owner having the power to vote or dispose, or direct the vote or of									
<ul> <li>Each executive officer and director of corporate issuers and of corporate general</li> <li>Each general and managing partner of partnership issuers.</li> </ul>	I and managing partners of partnership issuers; and								
	Executive Officer Director General and/or								
Check Box(es) that Apply:  Promoter Beneficial Owner	Managing Partner								
Full Name (Last name first, if individual)	Than againg a without								
Barraclough, Keith									
Business or Residence Address (Number and Street, City, State, Zip Code)									
410 Cambridge Ave., 2 <sup>nd</sup> Floor, Palo Alto, CA 94301									
	Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)									
Tai, William									
Business or Residence Address (Number and Street, City, State, Zip Code)									
2800 Sand Hill Road, Suite 150, Menlo Park, CA 94025									
Check Box(es) that Apply: Promoter Beneficial Owner I	Executive Officer Director General and/or  Managing Partner								
Full Name (Last name first, if individual)  Lin, Felix									
Business or Residence Address (Number and Street, City, State, Zip Code)									
410 Cambridge Ave., 2nd Floor, Palo Alto, CA 94301									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐	Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)									
Weingarten, Tim									
Business or Residence Address (Number and Street, City, State, Zip Code)									
435 Tasso Street, Suite 120, Palo Alto, CA 94301									
Check Box(es) that Apply: Promoter Beneficial Owner I	Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)									
Guenther, Morgan									
Business or Residence Address (Number and Street, City, State, Zip Code)									
1001 Bridgeway, Ste. 219, Sausalito, CA 94965									
	Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)									
Charles River Partnership XI, L.P.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
1000 Winter Street, Suite 3300, Waltham, MA 02451									
	Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)									
Worldview Technology Partners IV, L.P.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
435 Tasso Street, Suite 120, Palo Alto, CA 94301									
	Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)									
Motorola, Inc.  Business of Pasidence Address (Number and Street City State 7 in Code)									
Business or Residence Address (Number and Street, City, State, Zip Code)	ura II 60106								
Motorola Ventures c/o Motorola, Inc. 1303 East Algonquin Road, Schaumburg, IL 60196									
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)									

{00034345.DOC;1} Page 2 of 9

A. BASIC IDENTIFICATION DATA							
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>							
Each general and managing partner of partnership	p issuers.						
Check Box(es) that Apply: ☐ Promoter ☐	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) Cheston, Janet				·			
Business or Residence Address (Number and Street, C	Tity State 7in Code)	<u> </u>					
410 Cambridge Ave., 2 <sup>nd</sup> Floor, Palo Alto, CA 943							
<del></del>	Beneficial Owner		Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Trescot, David	City State 7in Code)						
Business or Residence Address (Number and Street, C 410 Cambridge Ave., 2 <sup>nd</sup> Floor, Palo Alto, CA 943							
		Mr: 000					
·	Beneficial Owner	Executive Officer	☐ Director	General and/or			
Quach, Richard Full Name (Last name first, if individual)				Managing Partner			
410 Cambridge Ave., 2 <sup>nd</sup> Floor, Palo Alto, CA 943	01						
Business or Residence Address (Number and Street, C		· · · · · · · · · · · · · · · · · · ·					
Dusiness of Residence Address (Number and Street, C	only, State, Zip Code)						
Check Box(es) that Apply: Promoter	Beneficial Owner		Director	General and/or			
French, Richard	Deficitetat Owner	ZZ Excentive Officer	M Director	Managing Partner			
Full Name (Last name first, if individual)				Withing The thirt			
410 Cambridge Ave., 2 <sup>nd</sup> Floor, Palo Alto, CA 943	01						
Business or Residence Address (Number and Street, C							
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Check Box(es) that Apply:  Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, C	City, State, Zip Code)		•				
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, C	City, State, Zip Code)			-,, .			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, C	City, State, Zip Code)						
(Use blank shee	et, or copy and use add	itional copies of this sheet,	as necessary)				

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				**	B. I	NFORMAT	TION ABO	UT OFFE	RING				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.								•••••	Yes	No ⊠			
2. What is the minimum investment that will be accepted from any individual?									••••••	N/A			
3.	Does th	e offering p	ermit joint	ownership	of a single	unit?						Yes □	No ⊠
<ol> <li>Does the offering permit joint ownership of a single unit?</li></ol>									es in the C and/or				
Full	Name (I	Last name f	irst, if indiv	ridual)									
Bus	iness or l	Residence A	Address (Nu	mber and S	Street, City	, State, Zip	Code)						
Nan	ne of Ass	ociated Bro	ker or Dea	ler									
State	es in Wh	ich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers						
((	Check "A	All States" o	or check ind	ividuals St	ates)							🗆 A	II States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H!]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
1	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
ļ	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name (I	ast name f	irst, if indiv	idual)									
Busi	iness or I	Residence A	Address (Nu	imber and S	Street, City	, State, Zip	Code)						
Nan	ne of Ass	ociated Bro	ker or Deal	ler									
State	es in Wh	ich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers						
((	Check "A	All States" o	r check ind	ividuals Sta	ates)							🗆 A	II States
١	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
ſ	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name (L	ast name fi	irst, if indiv	idual)									_
Busi	ness or F	Residence A	ddress (Nu	mber and S	Street, City	State, Zip	Code)					<del></del>	
Nam	ne of Ass	ociated Bro	ker or Deal	er									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individuals States)								🗆 А	ll States				
[	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(	[IL]	[IN]	[Al]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[	MTJ	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	(wv)	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Better the aggregate offering price of securities included in his offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the manuacion is an exchange offering, better his bot offering Price Sold Sold Sold Sold Sold Sold Sold Sold	1	C. OFFERING PRICE, NUMBER OF ENVESTORS, EATENSES AND USE OF IN	JCEEDS	
Type of Security	1.	Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$ and		
Equity		Type of Security		•
Convertible Securities (including warrants).    S0   S0   S0     Partnership Interests.   S0   S0     Partnership Interests.   S0   S0     Total.   S310,000.00   S310,000.00     Total.   Answer also in Appendix, Column 3, if filing under ULOE.		Debt	\$310,000.00	\$310,000.00
Convertible Securities (including warrants)		Equity	\$0	\$0
Partnership Interests		<u> </u>		
Other (Specify		Convertible Securities (including warrants)	\$0	\$0
Total Answer also in Appendix, Column 3, if filing under ULOE.  2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."    Number lavestors		Partnership Interests	\$0	\$0
Answer also in Appendix, Column 3, if filing under ULOE.  2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."    Number   Investors		Other (Specify)	\$0	\$0
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."    Number   Num		Total	\$310,000.00	\$310,000.00
and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines.    Enter "0" if answer is "none" or "zero."		Answer also in Appendix, Column 3, if filing under ULOE.		· · · · · · · · · · · · · · · · · · ·
Non-accredited Investors		persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Dollar Amount of Purchase
Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering  Rule 505  Regulation A.  Rule 504  Total				· <del>-                                   </del>
Answer also in Appendix, Column 4, if filing under ULOE.  3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering Rule 505 Regulation A. Rule 504 S Rule 504 S Total  4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees. Printing and Engraving Costs Legal Fees. Accounting Fees Singineering fees Singingering fees Singing			0	·
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of Offering Rule 505 Regulation A. Rule 504 Total S Total S  4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees. Printing and Engraving Costs Legal Fees. Selegal Fees.		Total (for filings under Rule 504 only)	-	<u> </u>
Type of Offering Rule 505 Regulation A Rule 504 Total S  4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees. Printing and Engraving Costs Legal Fees.  Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify).	3.	by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of	of	Dellar Amount
Rule 505 S Regulation A S S Rule 504 S S S S S S S S S S S S S S S S S S S		Type of Offering		
Regulation A			•	\$
Total		Regulation A		
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees.  Printing and Engraving Costs  Legal Fees.  Accounting Fees.  Engineering Fees.  Sales Commissions (specify finders' fees separately)  Other Expenses (identify)		Rule 504		\$
this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees		Total		\$
Printing and Engraving Costs         \$           Legal Fees         \$ 10,000.00           Accounting Fees         \$           Engineering Fees         \$           Sales Commissions (specify finders' fees separately)         \$           Other Expenses (identify)         \$	4.	this offering. Exclude amounts relating solely to organization expenses of the insurer. The information mabe given as subject to future contingencies. If the amount of an expenditure is not known, furnish a	y	
Legal Fees.       \$ \$10,000.00         Accounting Fees       \$         Engineering Fees       \$         Sales Commissions (specify finders' fees separately)       \$         Other Expenses (identify)       \$		Transfer Agent's Fees		<u>\$</u>
Accounting Fees \$ Engineering Fees \$ Sales Commissions (specify finders' fees separately) \$ Other Expenses (identify) \$		Printing and Engraving Costs		\$
Engineering Fees \$ Sales Commissions (specify finders' fees separately) \$ Other Expenses (identify) \$		Legal Fees.	$\boxtimes$	\$10,000.00
Engineering Fees \$  Sales Commissions (specify finders' fees separately) \$  Other Expenses (identify) \$  \$				\$
Other Expenses (identify) \$		Engineering Fees		\$
		Sales Commissions (specify finders' fees separately)		<u>s</u>
Total		Other Expenses (identify)		\$
		Total		\$10,000.00

ě.	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PR	OCEEDS					
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 at total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted groproceeds to the issuer."	SS	\$300,000.00				
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for ea of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the be to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to t issuer set forth in response to Part C — Question 4.b above.	ox					
		Payments to Officers, Directors & Affiliates	Payments to Others				
	Salaries and fees.	□ \$0	□ \$0				
	Purchase of real estate	□ \$0	□ \$0				
	Purchase, rental or leasing and installation of machinery and equipment	□ \$0	□ \$0				
	Construction or leasing of plant buildings and facilities	□ \$0	□ \$0				
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	<b>\$</b> 0	□ \$0				
	Repayment of indebtedness	□ \$0	□ s				
	Working capital	\$300,000.00	□ s				
	Other (specify):						
		<b>□</b> \$0	□ \$0				
	Column Totals	□ \$	<b>□ \$</b> 0				
	Total Payments Listed (column totals added)	<b>⊠ \$</b> 30	00.000.00				
₹7°.	D. FEDERAL SIGNATURE						
Si	The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.						
	suer (Print or Type) Signature	Date	<del></del>				
	vvenu, Inc.	October	18, 2007				
	ame of Signer (Print or Type)  Title or Signer (Print or Type)						
R	ichard French Chief Executive Officer		<del></del>				

### ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18. U.S.C. 1001.)

